

Position Description

Read each heading carefully before proceeding. Make statements simple, brief, and complete. Be certain the form is signed. Send the original to the Office of Personnel Services.

CHECK ONE: ☐ NEW POSITION ☐ EXISTING POSITION ☒ UNCLASSIFIED

Part 1 - Items 1 through 12 to be completed by department head or personnel office.

1. Agency Name Department for Children and Families		9. Position No. K0229981	10. Budget Program Number		Agency Number	
2. Employee Name (leave blank if position vacant)			11. Present Class Title (if existing position) Human Services Consultant			
3. Division Family Services			12. Proposed Class Title			
4. Section Program Integrity	For Use By	13. Allocation				
5. Unit Quality Control		14. Effective Date				
6. Location (address where employee works) City County		15. By	Approved			
7. (circle appropriate time) Full time X Perm. X Inter. Part time Temp. %	Personnel Office	16. Audit Date: By: Date: By:				
8. Regular hours of work: (circle appropriate time) FROM: 8:00 AM To: 5:00 PM		17. Audit Date: By: Date: By:				
						Position Number

PART II - To be completed by department head, personnel office or supervisor of the position.

18. If this is a request to reallocate a position, briefly describe the reorganization, reassignment of work, new function added by law or other factors which changed the duties and responsibilities of the position:

The purpose of this position is to review statewide random samples of Food Assistance, TANF, Employment Services, and Child Care assistance cases to assess the accuracy of decisions and payments made by Human Service Specialists and to assure adherence to federal and state guidelines and continuous performance improvement. This position analyzes errors to determine trends and recommend corrective action strategies.

19. Who is the supervisor of this position? (person who assigns work, gives directions, answers questions and is directly in charge)?

Name

Title

Position Number

John Gibson

Human Services Supervisor

K0062879

Who evaluates the work of an incumbent in this position?

Name

Title

Position Number

Same

20. a) How much latitude is allowed employee in completing the work? b) What kinds of instructions, methods and guidelines are given to the employee in this position to help do the work? c) State how and in what detail assignments are made.

Assignments and due dates are made monthly either verbally or in writing.

Federal handbook, worksheets, and approved schedule forms used in completion of assignments.

The employee sets own schedule and is given considerable latitude in completing the assignments.

21. Describe the work of this position using the page or one additional page only. (Use the following format for describing job duties):

What is the action being done (use an action verb); to **whom** or **what** is the action directed (object of action); **why** is the action being done (be brief); **how** is the action being done (be brief). For each task state: Who reviews it? How often? What is it reviewed for?

Number Each Task and Indicate Percent of Time and Identity each function as essential or marginal by placing an E or M next to the % of time for each task. Essential functions are the primary job duties for which the position was created and that an employee must be able to perform, with or without reasonable accommodation. A marginal function is a peripheral, incident of minimal part of the position.

No. Each Task and Indicate Percent of Time	E or M	
25%	E	Independently reviews monthly statewide random samples of Food Assistance casework performed by EES Human Service Specialists to determine if the correct eligibility decisions were made, if the payments were accurate, and if the actions were done timely all in accordance with Federal and State guidelines. Reviews include analyzing documentation in both the paper and electronic case files.
30%	E	Verifies all information obtained from case records, completes in-person, video, or telephone interviews, and documents information not secured or missing for each factor of eligibility. The verification process requires oral, written, and electronic communication with collateral contacts such as banks, insurance companies, doctors, lawyers, government agencies, employers, and neighbors. Researches available online and automated systems to verify information.
25%	E	Analyzes results of reviews per State and Federal policies to resolve conflicts between agency, client, and collateral information. Completes reviews in a timely manner to ensure they can be transmitted within the time frame established by the Federal agency, maintaining the integrity of the review process. Attends staff and supervisory conferences and training meetings as required to keep abreast of all federal and state regulation and policy changes. Adheres to all HIPAA requirements.
10%	E	Provides input in QC project planning.
10%	E	Uses approved methods/tools to record results of each review on a Federal worksheet and/or State approved form including documented reasons for error and substantiating state program references to the local DCF office. Attaches appropriate pieces of verification such as letters and official documents to the final review finding. Records the QC decision on Federal code or data sheets using coding instructions from the appropriate QC manual for compilation of statistical information by State and Federal agencies.
		Independently reviews statewide random sample of Child Care casework every three years and reports the final error rate findings per Federal guidelines. Completes special studies and reviews as assigned such as samples of case reviews completed by local office Human Service Supervisors and Performance Improvement Human Service Consultants for accuracy of review findings and policy knowledge. Special reviews also include local Child Care, TANF or Employment Services, as needed.

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22. a. If work involves leadership, supervisory, or management responsibilities, check the statement which best describes the position:
- () Lead worker assigns, trains, schedules, oversees, or reviews work of others.
 - () Plans, staffs, evaluates, and directs work of employees of a work unit.
 - () Delegates authority to carry out work of a unit to subordinate supervisors or managers.
- b. List the names, class titles, and position numbers of all persons who are supervised directly by employee on this position.
- | Name | Title | Position Number |
|------|-------|-----------------|
|------|-------|-----------------|

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23. Which statement best describes the results of error in action or decision of this employee?
- () Minimal property damage, minor injury, minor disruption of the flow of work.
 - (X) Moderate loss of time, injury, damage or adverse impact on healthy and welfare of others.
 - () Major program failure, major property loss, or serious injury or incapacitation.
 - () Loss of life, disruption of operations of a major agency.
- Please give examples.

If the essential functions are not performed adequately, the agency's funding is placed in jeopardy.

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24. For what purpose, with whom and how frequently are contacts made with the public, other employees or officials?

Daily contacts are made with DCF employees, other government employees, customers and collateral contacts to investigate eligibility, solicit information and obtain verification to substantiate eligibility decisions of each case reviewed.

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25. What hazards, risks or discomforts exist on the job or in the work environment?

Office work is predominantly sedentary and requires minimal or negligible physical exertion. However, there are long hours spent looking at a computer screen. Work outside of the office requires physical exertion with the ability to independently travel by car statewide. Home visits and other contacts may have to be made in difficult places to access.

Employees often confront hostile and unstable persons in unstructured environments while making home visits for investigation of eligibility. Physical surroundings are sometimes unsafe and unhealthy. However, every attempt is made to mitigate these circumstances when known in advance by meeting in a public place or being accompanied by law enforcement.

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26. List machines or equipment used regularly in the work of this position. Indicate the frequency with which they are used:

Personal computer, copy machine, scanner, fax machine, and telephones are used daily.

PART III - To be completed by the department head or personnel office

27. List the minimum amounts of education and experience which you believe to be necessary for an employee to begin employment in this position.

Education - General

Education or Training - special or professional

Licenses, certificates and registrations

Special knowledge, skills and abilities

Experience - length in years and kind

Five years of experience interviewing, investigating, compiling information, documenting decisions, interpreting guidelines and/or providing technical assistance relevant to the agency's programs. Postsecondary education may be substituted for experience as determined relevant by the agency.

28. SPECIAL QUALIFICATIONS

State any additional qualifications for this position that are necessary either as a physical requirement of an incumbent on the job, a necessary special requirement, a bona fide occupational qualification (BFOQ) or other requirement that does not contradict the education and experience statement on the class specification. A special requirement must be listed here in order to obtain selective certification.

BA or BS degree from a 4-year college or university.

At least 2 years of experience in determining eligibility and authorizing benefits for Food Assistance and at least one other EES program: TANF, Work Programs or Child Care.

Prior knowledge and use of DCF eligibility systems.

Signature of Employee

Date

Signature of Personnel Official

Date

Approved:

Signature of Supervisor

Date

Signature of Agency Head or
Appointing Authority

Date